BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

		CLAIMS AS	(Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			21				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			ال minus 20=		• 1			X\$ 9=		OR	X\$18=	18
INDEPENDENT CLAIMS			√ minus 3 =		* /		l	X40=	_	OR	X80=	80
MULTIPLE DEPENDENT CLAIM P			RESENT				ŀ	+135=		OR	+270=) ;
* If the difference in column 1 is less than zero, enter					r "0" in c	column 2	Į	TOTAL		OR	TOTAL	808
CLAIMS AS AMENDED - PART II								TOTAL		lou	OTHER	
		(Column 1)	(Colur		mn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQ V	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
\ME!	Independent	*	Minus	***		=		X40=		OR	X80=	
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT. FEE	
1		,	ADDIT. FEE	·	J - ' '	AUUII. FEE						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREV	IMN 2) HEST MBER IOUSLY D FOR	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** -		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	MULTIPLE DEPENDEN		T CLAIM			+135=		OR	+270=	
								TOTAL ADDIT. FEE	·	OR	TOTAL	
(Column 1) (Column 2) (Column 3)								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO M	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	Ĭ.
ME	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEP				IT CLAIN	<u> </u>				1		
	If the entry in colu	ımn 1 is less than	the entry in col	ımn 2, wri	ite "0" in c	olumn 3.	ļ	+135= TOTAL		OR	TOTAL	<u> </u>
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											L	
1	The "Highest Nun	nber Previously Pa	aid For" (Total o	r Indepen	dent) is th	ne highest number	r fo	und in the ap	propriate be	ox in c	olumn 1.	